WENMM/SB/05 (4-01)
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Under the Paperwork Reduction Act of 1995, no persons are requ			4002-3431											
UTILITY	U I ILI I Y		Young											
PATENT APPLICATION	Title	<u> </u>	MULTI-AXIAL, CROSS-LINK CONNECTOR SYSTEM FOR SPINAL IMPLANTS											
TRANSMITTAL	Express Mail Label No.		EL 984271075 US											
(Only for new nonprovisional applications under 37 CFR § 1.53(b))	7.50(0)/ Express (valided)		Mail Stop Patent Application											
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRE	SS TO:	PO Box 145	er for Patents 0 VA 22313-1450	0 10 ■								
			20. 7011 6		, large table or	90								
Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)			Computer Prog	gram (Appendix	:)	17497 U.S. 017497								
2. Applicant claims small entity status. See 37 CFR 1.27.			Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)											
3. Specification [Total Pages	36]	a.		r Readable For		2-								
(preferred arrangement set forth below)	(preferred arrangement set forth below) - Descriptive title of the Invention			 b. Specification Sequence Listing on: i.										
- Cross References to Related Applications	ii. paper													
 Statement Regarding Fed sponsored R & D Reference sequence listing, a table, or a computer progr 	C.	Continue and a specificing identity of above copies												
appendix	<u> </u>	ACCOMPANYING APPLICATION PARTS												
Background of the Invention Brief Summary of the Invention	. 🗖	(a subset 6 decument(s))												
- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure			9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R. § 3.73(b) Statement Power of Attorney (when there is an assignee)											
								4. Drawing(s) (35 U.S.C. 113) [Total Pages	nformal 🛛 Formal			11. English Translation Document (if applicable)		
	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations													
a. Newly executed (original or copy) UNS	SIGNED		•	S)/PTO-1449	,	Citations								
b. Copy from a prior application (37 C.F.R.§1.63(d)) 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503)														
b. Copy from a prior application (37 C.F.R.§1.63(a)) (for continuation/divisional with Box 18 completed) 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)														
Contain to specific property														
Signed statement attached deleting inventor(s) named														
in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).			16. Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:											
								6. Application Data Sheet. See 37 CFR 1.76						
								18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application						
Data Sheet under 37 CFR 1.76:														
Continuation Divisional Continuation-in-part (CIP) of prior application No.														
Prior application information: Examiner: Group / Art Unit: Group / art Unit: group is supplied under Box 5b. is														
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only considered a part of the disclosure of the accompanying continuation or divisional application parts.														
be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS														
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Customer Number or Bar Code Label (Insert C	ustomér No. or a	ittach bar code	label here)	or 🖾 C	orrespondence a	audiess below								
Name Woodard, Emhardt, Moriarty, McNe	tt & Henry LLP													
Address Bank One Center/Tower														
Address 111 Monument Circle, Suite 3700		111		Zip Code	46204-5137									
City Indianapolis	State Telephone	(317) 634-	3456	Fax	(317) 637-756	51								
Country USA	relephone	(017) 004-			Attomey/Agent)	42,021								
Name (Print/Type) James B. Myers, Jr.	- //	/			Date	October 28, 2003								
Signature famus B. Mil	1er 4	7	D-1	o of Donosit I	Oct	ober 28, 2003								
Express Mail Label No. / EL 30427 1073 03 //														
I hereby certify that this paper is being deposited with the Officed date indicated above and is addressed to the Commissioner for I	Patents, PO Box	1450 Alexand	iria, VA 22313	1450										
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Signature of person mailing paper or fee														

Signature

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WENMM/SB/17 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known **FEE TRANSMITTAL** Application Number . လ October 28, 2003 Filing Date v for FY 2003 First Named Inventor Young Effective 01/01/2003. Patent fees are subject to annual revision. Examiner Name Art Unit Applicant claims small entity status. See 37 CFR 1.27 Attorney Docket No. 4002-3431 1,712.00 TOTAL AMOUNT OF PAYMENT FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) 3. ADDITIONAL FEES __ Other Money Order Credit Card Check Small Entity Large Entity Deposit Account: Fee Fee Fee Paid Deposit Fee Description Code (\$) (\$) Code 23-3030 Surcharge - late filing fee or oath Account 2051 65 1051 130 Surcharge - late provisional filing fee Number 25 2052 1052 50 or cover sheet Non-English specification 1053 130 Woodard, Emhardt, Moriarty, McNett 1053 130 Deposit For filing a request for ex parte Account & Henry LLP 1812 2,520 2,520 1812 reexamination Name Requesting publication of SIR prior The Commissioner is authorized to: (check all that apply) *920 1804 1804 *920 Examiner action Credit any overpayments Charge any fee(s) indicated below Requesting publication of SIR after Charge any additional fee(s) during the pendency of this application excluding *1,840 *1,840 1805 1805 Examiner action Extension for reply within first month the payment of issue fees 55 2251 1251 110 Charge fee(s) indicated below, except for the filling fee, to the above-identified Extension for reply within second 210 2252 1252 420 deposit account Extension for reply within third 475 1253 950 2253 month **FEE CALCULATION** Extension for reply within fourth 740 1254 1,480 2254 month 1. BASIC FILING FEE Extension for reply within fifth month 1,005 2255 2,010 1255 Large Entity Small Entity Notice of Appeal 165 2401 330 1401 Filing a brief in support of an appeal Fee Fee Fee 165 Fee 2402 1402 330 Fee Paid Fee Description Code (\$) Request for oral hearing (\$) Code 290 2403 145 770.00 1403 385 Utility filing fee Petition to institute a public use 770 2001 1001 1451 1,510 1451 1,510 proceeding 2002 170 Design filing fee 1002 340 Petition to revive - unavoidable 2452 55 1452 110 Plant filing fee 2003 265 1003 530 Petition to revive - unintentional 2453 665 1,330 1453 Reissue filing fee 770 2004 385 Utility issue fee (or reissue) 1004 2501 665 1501 1,330 Provisional filing fee 2005 1005 160 240 Design issue fee 2502 770.00 1502 480 SUBTOTAL 1. Plant issue fee 2503 320 1503 640 Petitions to the Commissioner 1460 130 1460 130 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Processing fee under 37 CFR 1807 50 1807 50 Submission of Information Fee 180 Fee from 180 1806 Extra 1806 Disclosure Stmt Paid Below Claims Recording each patent assignment 684.00 18.00 per property (times number of -20**= 38 58 **Total Claims** 8021 40 40 8021 Properties) 258.00 3 Χ 86.00 -3** 6 Independent Claims Filing a submission after final 0.00 385 rejection 1809 770 2809 Multiple Dependent Claim ((37 CFR 1.129(a)) Small Entity Large Entity For each additional invention to be 385 2810 Fee 1810 770 Fee Fee Examined (37 CFR 1.129(b)) Fee Fee Description Code (\$) Request for Continued Examination Code (\$) Claims in excess of 20 385 2801 18 2202 q 1801 770 1202 (RCE) Independent claims in excess of 3 2201 43 Request for expedited examination 86 1201 900 1802 900 1802 Multiple dependent claim, if not paid 2203 145 1203 290 a design application **Reissue independent claims over original 2204 86 1204 natent Other Fee **Reissue claims in excess of 20 and over 2205 1205 18 (specify) original patent 0.00 SUBTOTAL 3. 942.00 SUBTOTAL 2. *Reduced by Basic Filing Fee Paid **or number previously paid, if greater, For Reissues, see above SUBMITTED BY Registration No. (317) 634-3456 Telephone 42,021 Name James B. Myers, Jr. (Attorney/Agent) (Print/Type) October 28, 2003 Date